

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 22  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>Active Engagement</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 15 / 2020</b>
Mailing Address <b>113 East Market St Suite 300</b>		Amount <b>38819.00</b>
City <b>Leesburg</b>	State <b>VA</b>	Zip Code <b>20176</b>
Purpose of Expenditure <b>SMS Messaging</b>	Category/Type	Transaction ID : <b>SE.22213</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 15 / 2020</b>
Name of Federal Candidate <b>FLETCHER, ELIZABETH, ,</b>		Office Sought: <input checked="" type="checkbox"/> House District: <b>07</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought <b>312627.06</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Active Engagement</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 15 / 2020</b>
Mailing Address <b>113 East Market St Suite 300</b>		Amount <b>22182.00</b>
City <b>Leesburg</b>	State <b>VA</b>	Zip Code <b>20176</b>
Purpose of Expenditure <b>SMS Messaging</b>	Category/Type	Transaction ID : <b>SE.22247</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 15 / 2020</b>
Name of Federal Candidate <b>DAVIS, WENDY, ,</b>		Office Sought: <input checked="" type="checkbox"/> House District: <b>21</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought <b>223435.72</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>61001.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

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Date

MM / DD / YYYY  
**10 / 16 / 2020**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Active Engagement</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2020
Mailing Address 113 East Market St Suite 300		Amount 36046.00
City Leesburg	State VA	Zip Code 20176
Purpose of Expenditure SMS Messaging	Category/ Type	Transaction ID : SE.22248 Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2020
Name of Federal Candidate KULKARNI, SRI PRESTON, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought 343007.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Active Engagement</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2020
Mailing Address 113 East Market St Suite 300		Amount 30501.00
City Leesburg	State VA	Zip Code 20176
Purpose of Expenditure SMS Messaging	Category/ Type	Transaction ID : SE.22249 Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2020
Name of Federal Candidate VALENZUELA, CANDACE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 24 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought 360414.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	66547.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00530766       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 16 / 2020</div> </div>	
Mailing Address 800 Commerce Dr		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">885.02</div>	
City Upper Marlboro	State MD	Zip Code 20774	<b>Transaction ID : SE.22165</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 07 / 2020</div> </div>
Purpose of Expenditure Postage		Category/ Type	
Name of Federal Candidate TRUMP, DONALD J., , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">3089830.41</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 16 / 2020</div> </div>	
Mailing Address 800 Commerce Dr		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">885.03</div>	
City Upper Marlboro	State MD	Zip Code 20774	<b>Transaction ID : SE.22166</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 07 / 2020</div> </div>
Purpose of Expenditure Postage		Category/ Type	
Name of Federal Candidate BIDEN, JOSEPH R JR, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">3090715.44</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1770.05</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 4 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Corporate Communications Group</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>		
Mailing Address 800 Commerce Dr			Amount <b>295.00</b>		
City Upper Marlboro	State MD	Zip Code 20774	Transaction ID : <b>SE.22167</b>		
Purpose of Expenditure Postage		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 07 / 2020</b>		
Name of Federal Candidate TILLIS, THOM R. SEN., , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>256823.41</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>Corporate Communications Group</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>		
Mailing Address 800 Commerce Dr			Amount <b>295.00</b>		
City Upper Marlboro	State MD	Zip Code 20774	Transaction ID : <b>SE.22168</b>		
Purpose of Expenditure Postage		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 07 / 2020</b>		
Name of Federal Candidate CUNNINGHAM, CAL, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>257118.41</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>590.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address 800 Commerce Dr		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">295.00</div>	
City Upper Marlboro	State MD	Zip Code 20774	Transaction ID : SE.22178
Purpose of Expenditure Postage	Category/ Type	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate KELLY, MARK, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: AZ	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address 800 Commerce Dr		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">295.00</div>	
City Upper Marlboro	State MD	Zip Code 20774	Transaction ID : SE.22183
Purpose of Expenditure Postage	Category/ Type	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate DAINES, STEVE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: MT	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">590.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 6 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY /  /

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2020
Mailing Address 800 Commerce Dr		Amount 295.00
City Upper Marlboro	State MD	Zip Code 20774
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.22184 Date of Disbursement or Obligation MM / DD / YYYY 10 / 07 / 2020
Name of Federal Candidate BULLOCK, STEVE, ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 54338.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2020
Mailing Address 800 Commerce Dr		Amount 295.00
City Upper Marlboro	State MD	Zip Code 20774
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.22198 Date of Disbursement or Obligation MM / DD / YYYY 10 / 07 / 2020
Name of Federal Candidate JAMES, JOHN, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 294823.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	590.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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**(Schedule E)**

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NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address 800 Commerce Dr		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">295.00</div>	
City Upper Marlboro	State MD	Zip Code 20774	Transaction ID : SE.22199
Purpose of Expenditure Postage	Category/ Type	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate PETERS, GARY, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address 800 Commerce Dr		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">295.00</div>	
City Upper Marlboro	State MD	Zip Code 20774	Transaction ID : SE.22214
Purpose of Expenditure Postage	Category/ Type	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate HUNT, WESLEY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President State: TX	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">590.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">M M M</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">D D D</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">Y Y Y Y Y Y Y Y</table>	

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">16</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2020</table>	
Mailing Address 800 Commerce Dr		Amount <table border="1" style="display:inline-table; width:100%; height:20px; text-align:right">295.00</table>	
City Upper Marlboro	State MD	Zip Code 20774	Transaction ID : SE.22215
Purpose of Expenditure Postage	Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">07</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2020</table>	
Name of Federal Candidate FLETCHER, ELIZABETH, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">16</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2020</table>	
Mailing Address 800 Commerce Dr		Amount <table border="1" style="display:inline-table; width:100%; height:20px; text-align:right">295.00</table>	
City Upper Marlboro	State MD	Zip Code 20774	Transaction ID : SE.22226
Purpose of Expenditure Postage	Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">07</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2020</table>	
Name of Federal Candidate ROY, CHIP, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<table border="1" style="display:inline-table; width:100%; height:20px; text-align:right">590.00</table>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	<table border="1" style="display:inline-table; width:100%; height:20px; text-align:right"></table>
(c) TOTAL Independent Expenditures..... ▶	<table border="1" style="display:inline-table; width:100%; height:20px; text-align:right"></table>

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Signature



**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 9 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>
Mailing Address 800 Commerce Dr		Amount <b>295.00</b>
City Upper Marlboro	State MD	Zip Code 20774
Purpose of Expenditure Postage	Category/Type	Transaction ID : <b>SE.22227</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 07 / 2020</b>
Name of Federal Candidate DAVIS, WENDY, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>21</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought <b>158703.20</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>
Mailing Address 800 Commerce Dr		Amount <b>295.00</b>
City Upper Marlboro	State MD	Zip Code 20774
Purpose of Expenditure Postage	Category/Type	Transaction ID : <b>SE.22229</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 07 / 2020</b>
Name of Federal Candidate NEHLS, TROY, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>22</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought <b>241615.89</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>590.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 16 / 2020**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

PAGE	10	OF	22
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766																									
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1"> <tr> <td>M</td><td>M</td><td></td> <td>D</td><td>D</td><td></td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		M	M		D	D		Y	Y	Y	Y														
M	M		D	D		Y	Y	Y	Y																		

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination <table border="1"><tr><td>M</td><td>M</td><td></td><td>D</td><td>D</td><td></td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <b>10 / 16 / 2020</b>		M	M		D	D		Y	Y	Y	Y																											
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Mailing Address <b>800 Commerce Dr</b>		Amount <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <b>295.00</b>																																						
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Purpose of Expenditure Postage		Category/Type <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>													Date of Disbursement or Obligation <table border="1"><tr><td>M</td><td>M</td><td></td><td>D</td><td>D</td><td></td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <b>10 / 07 / 2020</b>		M	M		D	D		Y	Y	Y	Y														
M	M		D	D		Y	Y	Y	Y																															
Name of Federal Candidate <b>KULKARNI, SRI PRESTON, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>22</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>																																					
Calendar Year-To-Date Per Election for Office Sought <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <b>241910.89</b>																										Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶														

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination <table border="1"><tr><td>M</td><td>M</td><td></td><td>D</td><td>D</td><td></td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <b>10 / 16 / 2020</b>		M	M		D	D		Y	Y	Y	Y																											
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City <b>Upper Marlboro</b>	State <b>MD</b>	Zip Code <b>20774</b>	Transaction ID : <b>SE.22231</b>																																					
Purpose of Expenditure Postage		Category/Type <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>													Date of Disbursement or Obligation <table border="1"><tr><td>M</td><td>M</td><td></td><td>D</td><td>D</td><td></td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <b>10 / 07 / 2020</b>		M	M		D	D		Y	Y	Y	Y														
M	M		D	D		Y	Y	Y	Y																															
Name of Federal Candidate <b>VAN DUYNE, ELIZABETH ANN, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>24</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>																																					
Calendar Year-To-Date Per Election for Office Sought <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <b>274567.48</b>																										Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶														

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <b>590.00</b>																								
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																								
(c) TOTAL Independent Expenditures.....▶	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																								

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

M	M		D	D		Y	Y	Y	Y		

**10 / 16 / 2020**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>	
Mailing Address 800 Commerce Dr		Amount <b>295.00</b>	
City Upper Marlboro	State MD	Zip Code 20774	Transaction ID : <b>SE.22232</b>
Purpose of Expenditure Postage	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 07 / 2020</b>	
Name of Federal Candidate VALENZUELA, CANDACE, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>24</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>	
Mailing Address 800 Commerce Dr		Amount <b>295.00</b>	
City Upper Marlboro	State MD	Zip Code 20774	Transaction ID : <b>SE.22233</b>
Purpose of Expenditure Postage	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 07 / 2020</b>	
Name of Federal Candidate COLLINS, GENEVIEVE D, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>32</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>590.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Gross, Jennifer, , ,

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Date

MM / DD / YYYY  
**10 / 16 / 2020**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 12 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>
Mailing Address 800 Commerce Dr		Amount <b>295.00</b>
City Upper Marlboro	State MD	Zip Code 20774
Purpose of Expenditure Postage	Category/Type	Transaction ID : <b>SE.22234</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 07 / 2020</b>
Name of Federal Candidate ALLRED, COLIN, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>32</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought <b>166197.11</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Corporate Communications Group</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>
Mailing Address 800 Commerce Dr		Amount <b>295.00</b>
City Upper Marlboro	State MD	Zip Code 20774
Purpose of Expenditure Postage	Category/Type	Transaction ID : <b>SE.22263</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 07 / 2020</b>
Name of Federal Candidate MCSALLY, MARTHA, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>AZ</b>
Calendar Year-To-Date Per Election for Office Sought <b>291515.53</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>590.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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Gross, Jennifer, , ,

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Date

MM / DD / YYYY  
**10 / 16 / 2020**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

PAGE 13 OF 22
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766											
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y					
M M M	/	D D D	/	Y Y Y Y Y Y									

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>16</td> <td></td> <td>2020</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	10		16		2020
M M M	/	D D D	/	Y Y Y Y Y Y									
10		16		2020									
Mailing Address 2800 Shirlington Rd		Amount <table border="1"> <tr> <td colspan="5">1107.38</td> </tr> </table>		1107.38									
1107.38													
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.22162										
Purpose of Expenditure Printing / Production		Category/ Type	Date of Disbursement or Obligation <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>16</td> <td></td> <td>2020</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		16		2020
M M M	/	D D D	/	Y Y Y Y Y Y									
10		16		2020									
Name of Federal Candidate TRUMP, DONALD J., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____										
Calendar Year-To-Date Per Election for Office Sought		<table border="1"> <tr> <td colspan="5">4171935.86</td> </tr> </table>	4171935.86					Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____					
4171935.86													

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>16</td> <td></td> <td>2020</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	10		16		2020
M M M	/	D D D	/	Y Y Y Y Y Y									
10		16		2020									
Mailing Address 2800 Shirlington Rd		Amount <table border="1"> <tr> <td colspan="5">1107.38</td> </tr> </table>		1107.38									
1107.38													
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.22163										
Purpose of Expenditure Printing / Production		Category/ Type	Date of Disbursement or Obligation <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>16</td> <td></td> <td>2020</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		16		2020
M M M	/	D D D	/	Y Y Y Y Y Y									
10		16		2020									
Name of Federal Candidate BIDEN, JOSEPH R JR., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____										
Calendar Year-To-Date Per Election for Office Sought		<table border="1"> <tr> <td colspan="5">4173043.24</td> </tr> </table>	4173043.24					Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____					
4173043.24													

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1"> <tr> <td colspan="5">2214.76</td> </tr> </table>	2214.76				
2214.76						
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<table border="1"> <tr> <td colspan="5"></td> </tr> </table>					
(c) TOTAL Independent Expenditures.....▶	<table border="1"> <tr> <td colspan="5"></td> </tr> </table>					

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Gross, Jennifer, , ,

[Electronically Filed]

Date

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2020

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address 2800 Shirlington Rd		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">369.13</div>	
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.22164
Purpose of Expenditure Printing / Production		Category/ Type	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>
Name of Federal Candidate TILLIS, THOM R. SEN., , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address 2800 Shirlington Rd		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">369.13</div>	
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.22170
Purpose of Expenditure Printing / Production		Category/ Type	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>
Name of Federal Candidate CUNNINGHAM, CAL, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">738.26</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Gross, Jennifer, , ,

[Electronically Filed]

Date

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Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

PAGE	15	OF	22
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766																									
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1"> <tr> <td>M</td><td>M</td><td>M</td> <td>D</td><td>D</td><td>D</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		M	M	M	D	D	D	Y	Y	Y	Y	Y	Y												
M	M	M	D	D	D	Y	Y	Y	Y	Y	Y																

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination <table border="1"> <tr> <td>M</td><td>M</td><td>M</td> <td>D</td><td>D</td><td>D</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		M	M	M	D	D	D	Y	Y	Y	Y	Y	Y												
M	M	M	D	D	D	Y	Y	Y	Y	Y	Y																
Mailing Address 2800 Shirlington Rd		Amount 369.13																									
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.22176																								
Purpose of Expenditure Printing / Production		Category/ Type	Date of Disbursement or Obligation <table border="1"> <tr> <td>M</td><td>M</td><td>M</td> <td>D</td><td>D</td><td>D</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>	M	M	M	D	D	D	Y	Y	Y	Y	Y	Y												
M	M	M	D	D	D	Y	Y	Y	Y	Y	Y																
Name of Federal Candidate MCSALLY, MARTHA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>																								
Calendar Year-To-Date Per Election for Office Sought		381104.11	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____																								

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination <table border="1"> <tr> <td>M</td><td>M</td><td>M</td> <td>D</td><td>D</td><td>D</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		M	M	M	D	D	D	Y	Y	Y	Y	Y	Y												
M	M	M	D	D	D	Y	Y	Y	Y	Y	Y																
Mailing Address 2800 Shirlington Rd		Amount 369.13																									
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.22189																								
Purpose of Expenditure Printing / Production		Category/ Type	Date of Disbursement or Obligation <table border="1"> <tr> <td>M</td><td>M</td><td>M</td> <td>D</td><td>D</td><td>D</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>	M	M	M	D	D	D	Y	Y	Y	Y	Y	Y												
M	M	M	D	D	D	Y	Y	Y	Y	Y	Y																
Name of Federal Candidate DAINES, STEVE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MT</u>																								
Calendar Year-To-Date Per Election for Office Sought		67986.17	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____																								

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	738.26
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Gross, Jennifer, , ,

[Electronically Filed]

Date

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 16 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>	
Mailing Address 2800 Shirlington Rd		Amount <b>369.13</b>	
City Arlington	State VA	Zip Code 22206	Transaction ID : <b>SE.22193</b>
Purpose of Expenditure Printing / Production	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 16 / 2020</b>	
Name of Federal Candidate KELLY, MARK, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AZ</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>	
Mailing Address 2800 Shirlington Rd		Amount <b>369.13</b>	
City Arlington	State VA	Zip Code 22206	Transaction ID : <b>SE.22194</b>
Purpose of Expenditure Printing / Production	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 16 / 2020</b>	
Name of Federal Candidate BULLOCK, STEVE, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MT</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>738.26</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Gross, Jennifer, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 16 / 2020**

Signature



**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 17 OF 22  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">M M M</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">D D D</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">Y Y Y Y Y Y Y Y</table>	

Full Name of Payee <b>The Lukens Company</b>			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">16</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2020</table>		
Mailing Address 2800 Shirlington Rd			Amount <table border="1" style="display:inline-table; width:100%; height:20px; text-align:right">369.13</table>		
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.22203		
Purpose of Expenditure Printing / Production		Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">16</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2020</table>		
Name of Federal Candidate JAMES, JOHN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table; width:100%; height:20px; text-align:right">387414.08</table>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____		

Full Name of Payee <b>The Lukens Company</b>			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">16</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2020</table>		
Mailing Address 2800 Shirlington Rd			Amount <table border="1" style="display:inline-table; width:100%; height:20px; text-align:right">369.13</table>		
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.22204		
Purpose of Expenditure Printing / Production		Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">16</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2020</table>		
Name of Federal Candidate PETERS, GARY, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table; width:100%; height:20px; text-align:right">387783.21</table>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<table border="1" style="display:inline-table; width:100%; height:20px; text-align:right">738.26</table>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ►	<table border="1" style="display:inline-table; width:100%; height:20px; text-align:right"></table>
(c) TOTAL Independent Expenditures..... ►	<table border="1" style="display:inline-table; width:100%; height:20px; text-align:right"></table>

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Gross, Jennifer, , ,

[Electronically Filed]

Date

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Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

PAGE 18 OF 22
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2020	
Mailing Address 2800 Shirlington Rd		Amount 369.13	
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.22211
Purpose of Expenditure Printing / Production		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 16 / 2020
Name of Federal Candidate HUNT, WESLEY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2020	
Mailing Address 2800 Shirlington Rd		Amount 369.13	
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.22212
Purpose of Expenditure Printing / Production		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 16 / 2020
Name of Federal Candidate FLETCHER, ELIZABETH, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	738.26
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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10 / 16 / 2020

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

PAGE	19	OF	22
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>	
Mailing Address 2800 Shirlington Rd		Amount <b>369.13</b>	
City Arlington	State VA	Zip Code 22206	Transaction ID : <b>SE.22250</b>
Purpose of Expenditure Printing / Production	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 16 / 2020</b>	
Name of Federal Candidate ROY, CHIP, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>21</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>	
Mailing Address 2800 Shirlington Rd		Amount <b>369.13</b>	
City Arlington	State VA	Zip Code 22206	Transaction ID : <b>SE.22251</b>
Purpose of Expenditure Printing / Production	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 16 / 2020</b>	
Name of Federal Candidate DAVIS, WENDY, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>21</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>738.26</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Date

MM / DD / YYYY  
**10 / 16 / 2020**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 20 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>	
Mailing Address 2800 Shirlington Rd		Amount <b>369.13</b>	
City Arlington	State VA	Zip Code 22206	Transaction ID : <b>SE.22252</b>
Purpose of Expenditure Printing / Production	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 16 / 2020</b>	
Name of Federal Candidate NEHLS, TROY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>22</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>	
Mailing Address 2800 Shirlington Rd		Amount <b>369.13</b>	
City Arlington	State VA	Zip Code 22206	Transaction ID : <b>SE.22254</b>
Purpose of Expenditure Printing / Production	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 16 / 2020</b>	
Name of Federal Candidate KULKARNI, SRI PRESTON, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <b>22</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>738.26</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

PAGE 21	OF 22
FOR SE OF FORM 24/48	

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>	
Mailing Address 2800 Shirlington Rd		Amount <b>369.13</b>	
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.22255
Purpose of Expenditure Printing / Production		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 16 / 2020</b>
Name of Federal Candidate VAN DUYN, ELIZABETH ANN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>24</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 16 / 2020</b>	
Mailing Address 2800 Shirlington Rd		Amount <b>369.13</b>	
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.22256
Purpose of Expenditure Printing / Production		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 16 / 2020</b>
Name of Federal Candidate VALENZUELA, CANDACE, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>24</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>738.26</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

PAGE	22	OF	22
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766																									
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1"> <tr> <td>M</td><td>M</td><td></td> <td>D</td><td>D</td><td></td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		M	M		D	D		Y	Y	Y	Y														
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Full Name of Payee <b>The Lukens Company</b>		Date of Public Distribution/Dissemination <table border="1"><tr><td>M</td><td>M</td><td></td><td>D</td><td>D</td><td></td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <b>10 / 16 / 2020</b>		M	M		D	D		Y	Y	Y	Y																											
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Name of Federal Candidate <b>COLLINS, GENEVIEVE D, ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>32</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>																																					
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Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

M	M		D	D		Y	Y	Y	Y		

**10 / 16 / 2020**

Signature